

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Naled</i>		08-09-01
O.I.P.E. CLASSIFIER			10-8-16-01
FORMALITY REVIEW	H.T.	1117	9/12/01
RESPONSE FORMALITY REVIEW	R	1060	FH-02

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	2 7 12
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

10/12/01
6/26/01
1-14-02
907